

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET
NUMBER
PHNL030332 US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which (check only one item below):

- is attached hereto.
 was filed as United States application

Serial No _____

on _____

and was amended

on _____

was filed as PCT international application

Number PCT/IB2004/050221

on 10 March 2004

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03100755.2	24 March 2004	YES

Combined Declaration For Patent Application and Power of Attorney (Continued)
(includes Reference to PCT International Applications)

Attorneys Docket Number
PHNL030332 US

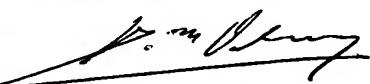
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902
Michael E. Marion, Reg. No. 32,266
Edward M. Blocker, Reg. No. 30,245

Direct Telephone Calls to:
(name and telephone number)
(914)332-0222

201		FULL NAME OF INVENTOR WOERLEE	FAMILY NAME WOERLEE	FIRST GIVEN NAME Pierre	SECOND GIVEN NAME Hermanus
		RESIDENCE & CITIZENSHIP Eindhoven	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
		POST OFFICE ADDRESS Prof. Holstlaan 6	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
202		FULL NAME OF INVENTOR KOPPERS	FAMILY NAME KOPPERS	FIRST GIVEN NAME Wilhelmus	SECOND GIVEN NAME Robert
		RESIDENCE & CITIZENSHIP Eindhoven	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
		POST OFFICE ADDRESS Prof. Holstlaan 6	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
203		FULL NAME OF INVENTOR MARTENS	FAMILY NAME MARTENS	FIRST GIVEN NAME Hubert	SECOND GIVEN NAME Cécile François
		RESIDENCE & CITIZENSHIP Eindhoven	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
		POST OFFICE ADDRESS Prof. Holstlaan 6	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
204		FULL NAME OF INVENTOR VAN DEN OETELAAR	FAMILY NAME VAN DEN OETELAAR	FIRST GIVEN NAME Ronald	SECOND GIVEN NAME Joseph Antonius
		RESIDENCE & CITIZENSHIP Eindhoven	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
		POST OFFICE ADDRESS Prof. Holstlaan 6	POST OFFICE ADDRESS Prof. Holstlaan 6	CITY 5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 	SIGNATURE OF INVENTOR 202 	SIGNATURE OF INVENTOR 203
DATE 21 October 2004	DATE 21 October 2004	DATE
SIGNATURE OF INVENTOR 204 		
DATE 21 October 2004		

U.S. DEPARTMENT OF COMMERCE - Patent and Trademarks Office

(July 1994)

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Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)				Attorneys Docket Number PHNL030332 US
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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203 	
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SIGNATURE OF INVENTOR 204				
DATE				

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(July 1994)